

ISSUE SLIP STAMP APP- (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|-------------------|--------------------|--------|---------|
| FEE DETERMINATION | | | 5/1/94 |
| I.P.E. CLASSIFIER | | | 5/1/94 |
| FORMALITY REVIEW | <i>[Signature]</i> | 108231 | 5/21/99 |

J.S. 69.34 7-28-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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